

Bow legs

Bow legged presentation is found when a distance of greater than 2.5cms is found between the knees when the ankles are brought together. This is called tibial varum. Under 2.5cms is considered to be normal.

Bowing occurs at the level of the knee and is a result of curvature of the shinbone. This bowing is commonly found in the infant and early walker, and is usually grown out by four years of age. Sometimes bowing is inherited and in this case the child may not grow out of it. Occasionally tibial bowing is accompanied a mal-alignment of the knee - Genu varum resulting in a BANDY LEGGED appearance. Advice must be sought if there is pain, the mal-alignment is severe or only one leg is affected.

Sometimes the foot may have to compensate for the bow legs. This is due to the angle of the leg to the ground. This may create a 'flat foot' and cause symptoms. If symptoms occur see your Podiatrist. Treatment can be in the form of insoles or exercises.

Please note that curvature of the leg is not treated but the associated problems with flat feet are.

Ankle Instability

Ankle instability is usually first discovered following an ankle sprain. The incident may be due to loosing balance on an uneven surface. If the ankle goes over- inversion sprains are the most common, the ligaments become stretched. Unfortunately the ligaments once stretched beyond a certain point do not recoil back and loose their strength.

If the sprain repeatedly occurs the ankle ligaments are unable to resist the strain and their proprioceptive properties fail. This means the ligaments do not respond to the ankles position in space and fail to contract to resist the impending sprain. Bony mal-alignments, short leg or tight Achilles tendons will also cause the heel to strike the ground on the outside of the foot resulting in instability.

Treatment from your Podiatrist will comprise of strapping, orthoses, strengthening exercises, wobble board or splints/ankle supports.

